TECHNOLOGY CENTER 3700

I hereby certify that on the date specified below, this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, YA 22313-1450.

Date

Carolyn L. Ross

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/930,041

: 3723

Confirmation No.

: 2218

Applicant : Scott E. Moore

: August 14, 2001

Attorney Docket No.: 500199.04

Customer No.

: 27,076

Art Unit

Examiner: Maurina T. Rachuba

Title

Filed

: METHOD AND APPARATUS FOR PLANARIZING A MICROELECTRONIC

SUBSTRATE WITH A TILTED PLANARIZING SURFACE

REQUEST FOR CONTINUED EXAMINATION (RCE) UNDER 37 C.F.R. § 1.114

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Applicant requests continued examination, under 37 C.F.R. § 1.114, of the above-identified application.

1. Submission Required Under 37 C.F.R. § 1.114

а. 📙	3 Submission previously submitted					
	i.		Consider the amendment/reply under 37 C.F.R. § 1.116 previously filed on			
	ii.	0	Consider the arguments in the Appeal Brief or Reply Brief previously filed			

iii. \(\begin{aligned} \text{Consider the Information Disclosure Statement (IDS) previously filed on \(\text{Statement}\)

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- i. [X] Amendment/Reply
- ii. [] Affidavit(s)/Declaration(s)
- iii. [] Information Disclosure Statement (IDS)
- 2. Suspension of Action (Period of suspension shall not exceed 3 months; fee under 37 C.F.R. § 1.17(i) required)
 - Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ___ months.

3. Accompanying Papers

- [X] Postcard
- [X] Check
- [X] Fee Transmittal Sheet
- Petition

4. Deposit Account

[X] The Commissioner is authorized to charge any additional fees required or credit any overpayment to Deposit Account No. 50-1266.

Scott En Moore

Respectfully submitted,

Date: // 7/ 04

By:

Reg. No. 43,872

Customer No. 27,076

Dorsey & Whitney LLP

1420 Fifth Avenue, Suite 3400

Seattle, WA 98101

(206) 903-8813

Attorney for Applicant

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